## Case 16-14956 Doc 1 Filed 05/02/16 Entered 05/02/16 10:34:01 Desc Main Document Page 1 of 52

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	: Identify Yourself							
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):					
1.	Your full name							
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Carol First name	First name					
	Bring your picture identification to your meeting with the trustee.	Middle name  Ward  Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)					
2.	All other names you have used in the last 8 years	•						
	Include your married or maiden names.							
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7533						

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Case number (if known)

Debtor 1 Carol L Ward

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		358 S Raynor Ave Apt 1 Joliet, IL 60435				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Will				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		PO Box 2953 Joliet, IL 60434				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Document Case number (if known) Debtor 1 Carol L Ward

7.	The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342  Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	<b>■</b> C	hapter 7			
		□с	hapter 11			
		□с	hapter 12			
		□с	hapter 13			
В.	How you will pay the fee		about how yo	ou may pay. Typ attorney is sub	pically, if you are paying the fee yo	k with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with
					tallments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Individuals to Pay
			I request that	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out		
						sial Form 103B) and file it with your petition.
).	Have you filed for bankruptcy within the last 8 years?	■ No				
	•		District		When	Case number
			District		When	Case number
			District		When	Case number
0.	Are any bankruptcy cases pending or being filed by a spouse who is	■ No				
	not filing this case with you, or by a business partner, or by an affiliate?					
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your	■ No	Go to I	ine 12.		
	residence?	□ Ye		our landlord obta	ained an eviction judgment agains	t you and do you want to stay in your residence?
		,		No. Go to line		
				Yes. Fill out In	itial Statement About an Eviction	Judgment Against You (Form 101A) and file it with this

Debtor 1 Carol L Ward

Document Page 4 of 52 Case number (if known)

Par	Report About Any Bu	sinesses	You Own	as a Sole Proprietor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State & ZIP Code				
	it to this petition.		Check	k the appropriate box to describe your business:				
				Health Care Business (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				Commodity Broker (as defined in 11 U.S.C. § 101(6))				
				None of the above				
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attact				der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate andicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B).				
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	No.	I am n	not filing under Chapter 11.				
		□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrupto Code.				
		☐ Yes.	I am fi	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Pari	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?  Number, Street, City, State & Zip Code				

Debtor 1 Carol L Ward Page 5 of 52 Case number (if known)

Part 5: Ex

### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Filed 05/02/16 Case 16-14956 Doc 1 Entered 05/02/16 10:34:01 Desc Main Page 6 of 52 Document Case number (if known) Debtor 1 Carol L Ward Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50.000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Carol L Ward

Signature of Debtor 2

MM / DD / YYYY

Executed on

Carol L Ward Signature of Debtor 1

Executed on May 2, 2016

MM / DD / YYYY

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Debtor 1 Carol L Ward Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Brent Ingram	Date	May 2, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
5		
Brent Ingram		
Printed name		
The Semrad Law Firm, LLC		
Firm name		
20 S. Clark Street		
28th Floor		
Chicago, IL 60603		
Number, Street, City, State & ZIP Code		
Contact phone (312) 913 0625	Email address	rsemrad@semradlaw.com
6306225		
Bar number & State		

		Docume	ent Page 8 of 52	
Fill in this infor	mation to identify your	case:		
Debtor 1	Carol L Ward	Middle Name	Last Name	
Debtor 2	Thot Hamo	Wilddio Name	Last Hamo	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

ai	11: Summarize Your Assets	Vaur	20040
		Your as	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,208.70
	1c. Copy line 63, Total of all property on Schedule A/B	\$	8,208.70
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	4,049.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	574.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	41,296.44
	Your total liabilities	\$	45,919.44
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,778.84
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,754.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	- Vaur debte are wimerily consumer debte. Consumer debte are those (in a constitution of individual arise with fac-		Company to the same

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Page 9 of 52 Case number (if known) Debtor 1 Carol L Ward

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,777.89 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	574.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	574.00

		Document	Page 10 of 52		
Fill in this inf	ormation to identify your	case and this filing:			
Debtor 1	Carol I Ward				
Debior 1	Carol L Ward First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
Offica Otatos	Barikraptoy Court for the.				
Case number					☐ Check if this is an
					amended filing
Official E	Form 106A/B				
_					
Schedu	ule A/B: Prop	erty			12/15
hink it fits best nformation. If n Answer every q	. Be as complete and accura nore space is needed, attach uestion.	pe items. List an asset only once. It ate as possible. If two married peop a a separate sheet to this form. On t	ole are filing together, both ar the top of any additional page	e equally responsible fo	r supplying correct
Part 1: Descri	ibe Each Residence, Building	g, Land, or Other Real Estate You C	)wn or Have an Interest In		
1. Do you own	or have any legal or equitabl	e interest in any residence, buildin	g, land, or similar property?		
■ No. Go to	Dort 2				
_					
☐ Yes. Whe	ere is the property?				
Part 2: Descri	ibe Your Vehicles				
	•	ele, also report it on Schedule G: tility vehicles, motorcycles	,	,	
3.1 Make:	Toyota	Who has an interest in t	the property? Check one		ed claims or exemptions. Put
Model:	Camry	■ Debtor 1 only	and property a choose one		cured claims on Schedule D: Claims Secured by Property.
Year:	2007	Debtor 2 only			
		,000 Debtor 1 and Debtor 2	2 only	Current value of the entire property?	Current value of the portion you own?
Other in	formation:	At least one of the del	•		
		Check if this is commoderate (see instructions)	munity property	\$5,634.0	0 \$5,634.00
Examples: E ■ No □ Yes	3oats, trailers, motors, pers	ATVs and other recreational vehonal watercraft, fishing vessels, s	snowmobiles, motorcycle ac	ccessories	
.pages you	ı have attached for Part 2	. Write that number here			\$5,634.00
	ibe Your Personal and Hous				0
Do you own	or nave any legal or equit	table interest in any of the follo	wing items?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
6. Household	I goods and furnishings				

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Dobtor 1	Case 16-14956 Doc 1 Filed 05/02/16 Entered 05/02/16 10:34:01  Document Page 11 of 52  Case number (if know	
Debtor 1		n)
■ Yes	. Describe	
	Used Furniture	\$350.00
□ No	<ul> <li>choics</li> <li>choics: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; musi-including cell phones, cameras, media players, games</li> <li>d. Describe</li> <li>Cell phone, two old tube TVs (one is a 19" and one is a 32")</li> </ul>	c collections; electronic devices \$150.00
Examp	ibles of value bles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, contour collections, memorabilia, collectibles  . Describe	nin, or baseball card collections;
Examp	nent for sports and hobbies  oles: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe musical instruments  . Describe	es and kayaks; carpentry tools;
■ No	ms  apples: Pistols, rifles, shotguns, ammunition, and related equipment  . Describe	
□ No	es aples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  Describe	
	Used Clothes	\$350.00
■ No ☐ Yes  13. Non-fa	ry  uples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems  Describe  arm animals  uples: Dogs, cats, birds, horses  Describe  ther personal and household items you did not already list, including any health aids you did not list	s, gold, silver
■ No □ Yes	. Give specific information	
	the dollar value of all of your entries from Part 3, including any entries for pages you have attached Part 3. Write that number here	\$850.00
	escribe Your Financial Assets wn or have any legal or equitable interest in any of the following?	Current value of the
, Ju 0	J	Janoni Talae of the

portion you own?
Do not deduct secured claims or exemptions.

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Case number (if known) Document Debtor 1 Carol L Ward 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes. 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... 17.1. Chase-Checking \$50.00 Woodforest Bank-Savings \$0.00 17.2. Abri Credit Union-Savings \$300.00 17.3. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders, Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: Widows Pension thorugh GM-cannot borrow \$40.70 against, receives \$40.70 every month 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

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Desc Main

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D	ebtor 1	Carol L Ward		Document	Page 13 of 52	ase number (if known)		
25.	Trusts,	equitable or future intere	ests in prope	rty (other than anythin	g listed in line 1), and	rights or powers exe	ercisable for your benefit	
	☐ Yes.	Give specific information a	bout them					
26.	Examp ■ No	s, copyrights, trademarks oles: Internet domain names Give specific information a	s, websites, p			3		
27.		es, franchises, and other						
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses  ■ No  □ Yes. Give specific information about them							
М		property owed to you?	bout trioni				Current value of the	
•••	ooy	property ented to you.					portion you own?  Do not deduct secured claims or exemptions.	
28.		unds owed to you						
	□ No ■ Yes.	Give specific information at	oout them, inc	cluding whether you alrea	ady filed the returns and	I the tax years		
			Antic	ciapted 2015 Tax Refu	und		\$1,334.0	
_			7 11110	siapica 2010 Tax Noic	ind .		Ψ1,004.0	
30.	<ul> <li>29. Family support         Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement         No         Yes. Give specific information</li> <li>30. Other amounts someone owes you         Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security</li> </ul>							
	■ No	benefits; unpaid loans				, , , ,	,	
		Give specific information						
31.		ts in insurance policies oles: Health, disability, or life	e insurance; h	nealth savings account (F	HSA); credit, homeowne	er's, or renter's insurar	nce	
	☐ Yes.	Name the insurance compa Com	any of each popany name:	olicy and list its value.	Beneficiary	<i>r</i> .	Surrender or refund value:	
32.	If you a someo	terest in property that is deare the beneficiary of a livin ne has died.				urrently entitled to rece	eive property because	
	☐ Yes.	Give specific information						
33.	Examp ■ No	against third parties, who				or payment		
24		Describe each claim	ad alaima sf	Overv nature including	a counteralaime of the	dobtor and rights to	set off claims	
34.	■ No	contingent and unliquidat  Describe each claim	ed cialms of	every nature, including	g counterclaims of the	deptor and rights to	O SECOTI CIAIMS	
35.	Any fin	ancial assets you did not	already list					

	Docu	)5/02/16 iment	Entered 09 Page 14 of	5/02/16 10:34:01 52 Case number (if known)	Desc Main
Debto	Carol L Ward			Case number (if known)	
	es. Give specific information				
	dd the dollar value of all of your entries from Part 4, or Part 4. Write that number here				\$1,724.70
Part 5:	Describe Any Business-Related Property You Own or Hav	e an Interest	In. List any real esta	te in Part 1.	
37. <b>Do</b>	you own or have any legal or equitable interest in any busin	ess-related	property?		
■ N	o. Go to Part 6.				
ΠY	es. Go to line 38.				
Part 6:	Describe Any Farm- and Commercial Fishing-Related Pro If you own or have an interest in farmland, list it in Part 1.	perty You Ov	vn or Have an Interes	st In.	
46. <b>D</b> c	you own or have any legal or equitable interest in a	ny farm- or	commercial fishin	g-related property?	
	No. Go to Part 7.				
	Yes. Go to line 47.				
Part 7:	Describe All Property You Own or Have an Interest in	That You D	id Not List Above		
<i>E:</i> ■ 1		ady list?			
□,	es. Give specific information				
54. <b>A</b>	dd the dollar value of all of your entries from Part 7.	Write that	number here		\$0.00
01. 7	iau ino uona. Vanao or an or your oninico nom r art //	TTTTO LITER I			
Part 8:	List the Totals of Each Part of this Form				
<i>EE</i> <b>E</b>	art 1: Total real estate, line 2				фо оо
	art 2: Total vehicles, line 5				\$0.00
	art 3: Total venicles, line 5		\$5,634.00 \$850.00		
	art 4: Total financial assets, line 36	_	\$1,724.70		
	art 5: Total business-related property, line 45	_	\$0.00		
	art 6: Total farm- and fishing-related property, line 5		\$0.00		
	art 7: Total other property not listed, line 54	+	\$0.00		
62. <b>T</b>	otal personal property. Add lines 56 through 61	_	\$8,208.70	Copy personal property t	otal \$8,208.70
63. <b>T</b>	otal of all property on Schedule A/B. Add line 55 + lin	e 62			\$8,208.70

Official Form 106A/B Schedule A/B: Property page 5

		17/1/11111			
Fill in this information to identify your case:					
Debtor 1	Carol L Ward				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
2007 Toyota Camry 110,000 miles	\$5,634.00		\$2,400.00	735 ILCS 5/12-1001(c)	
Elife Hoff Goredale 74 B. G. 1			100% of fair market value, up to any applicable statutory limit		
2007 Toyota Camry 110,000 miles Line from Schedule A/B: 3.1	\$5,634.00		\$451.00	735 ILCS 5/12-1001(b)	
Line Holl Schedule A.D. 3.1			100% of fair market value, up to any applicable statutory limit		
Used Furniture Line from Schedule A/B: 6.1	\$350.00		\$350.00	735 ILCS 5/12-1001(b)	
Elife Hoff Goredale 74 B. G. 1			100% of fair market value, up to any applicable statutory limit		
Cell phone, two old tube TVs (one is a 19" and one is a 32")	\$150.00		\$150.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
Used Clothes Line from Schedule A/B: 11.1	\$350.00		\$350.00	735 ILCS 5/12-1001(a)	
Line II on Schedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit		

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Case number (if known)

Debtor 1 Carol L Ward Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Chase-Checking 735 ILCS 5/12-1001(b) \$50.00 \$50.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Woodforest Bank-Savings 735 ILCS 5/12-1001(b) \$0.00 \$0.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Abri Credit Union-Savings 735 ILCS 5/12-1001(b) \$300.00 \$300.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit Widows Pension thorugh GM-cannot 735 ILCS 5/12-1006 \$40.70 \$40.70 borrow against, receives \$40.70 every month 100% of fair market value, up to Line from Schedule A/B: 21.1 any applicable statutory limit Anticiapted 2015 Tax Refund 735 ILCS 5/12-1001(b) \$1,334.00 \$1,334.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Casa 16-1/056 Filed 05/02/16 Entered 05/02/16 10:34:01 Docc Main

Cas	E 10-14330	Document Page 17	7 of 52	34.01 Desc IV	
Fill in this informa	ation to identify yo		(11.)/		
Debtor 1	Carol L Ward				
	First Name	Middle Name Last Name			
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bank	kruptcy Court for the	NORTHERN DISTRICT OF ILLINOIS			
Case number					
(if known)				☐ Check	if this is an
				amend	ed filing
Official Form	106D				
		s Who Have Claims Secure	d by Droport	.,	40/45
scriedule L	J. Creditors	s Who Have Claims Secure	a by Propert	У	12/15
		If two married people are filing together, both are edout, number the entries, and attach it to this form. O			
number (if known).	Additional Page, IIII II	out, number the entries, and attach it to this form. O	in the top of any addition	nai pages, write your nai	ne and case
. Do any creditors h	ave claims secured b	y your property?			
☐ No. Check t	his box and submit	this form to the court with your other schedules. Y	ou have nothing else t	o report on this form.	
Yes. Fill in a	all of the information	below.			
Part 1: List All	Secured Claims				
		more than one secured claim, list the creditor separately	, Column A	Column B	Column C
for each claim. If mor	re than one creditor ha	s a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list	the claims in alphabet	ical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Heights Fina	ance Corp	Describe the property that secures the claim:	\$4,049.00	\$5,634.00	\$0.00
Creditor's Name		2007 Toyota Camry 110,000 miles			
1145 Essing	aton Rd	As of the date you file, the claim is: Check all that			
1140 [3311]	alon ixu				
Joliet, IL 60	,	apply.			
Joliet, IL 60	435	Contingent			
	,	☐ Contingent ☐ Unliquidated			
Number, Street, C	435 City, State & Zip Code	Contingent			
Number, Street, C	435 City, State & Zip Code	☐ Contingent ☐ Unliquidated ☐ Disputed	cured		
Number, Street, C  Who owes the deb  Debtor 1 only	435 City, State & Zip Code	☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.	cured		
Number, Street, C  Who owes the deb  Debtor 1 only Debtor 2 only	435  City, State & Zip Code  The Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed  Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secar loan)	cured		
Number, Street, C  Who owes the deb  Debtor 1 only  Debtor 2 only  Debtor 1 and Deb	435  City, State & Zip Code  The Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or se	cured		
Number, Street, C  Who owes the deb  Debtor 1 only  Debtor 2 only  Debtor 1 and Deb	435 City, State & Zip Code  t? Check one.  tor 2 only e debtors and another m relates to a	☐ Contingent ☐ Unliquidated ☐ Disputed  Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secar loan) ☐ Statutory lien (such as tax lien, mechanic's lien)			
Number, Street, C  Who owes the deb  Debtor 1 only  Debtor 2 only  Debtor 1 and Deb  At least one of the	t? Check one.  tor 2 only e debtors and another m relates to a to Opened	☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or se car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
Number, Street, C  Who owes the deb  Debtor 1 only  Debtor 2 only  Debtor 1 and Deb  At least one of the	tor 2 only e debtors and another m relates to a to Opened 11/01/15	☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or se car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
Number, Street, C  Who owes the deb  Debtor 1 only  Debtor 2 only  Debtor 1 and Deb  At least one of the	435 City, State & Zip Code  1? Check one.  tor 2 only debtors and another m relates to a  1.  Opened 11/01/15 Last Active	☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or se car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			

## Part 2: List Others to Be Notified for a Debt That You Already Listed

If this is the last page of your form, add the dollar value totals from all pages.

Add the dollar value of your entries in Column A on this page. Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$4,049.00

\$4,049.00

Write that number here:

			Documer	nt Page 18 of	52	-	
Fill	in this inforn	nation to identify your ca	ise:				
Deb	tor 1	Carol L Ward					
200		First Name	Middle Name	Last Name			
	tor 2						
(Spot	use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Coo	e number						
(if kno	_					☐ Check	if this is an
						amend	led filing
О. С.		- 400E/E					
		<u>n 106E/F</u>					40/45
		/F: Creditors Wh					12/15
		d accurate as possible. Use racts or unexpired leases th					
		tory Contracts and Unexpire					
Sche	dule D: Credite	ors Who Have Claims Secur	ed by Property. If more spa	ice is needed, copy the Pa	rt you need, fill it out,	number the entries i	n the boxes on the
		tinuation Page to this page. nber (if known).	If you have no information	to report in a Part, do not	file that Part. On the t	op of any additional	pages, write your
Part	1: List A	II of Your PRIORITY Uns	ecured Claims				
1.	Do any credito	ors have priority unsecured	claims against you?				
	☐ No. Go to P	art 2.					
	Yes.						
		priority unsecured claims.					
		pe of claim it is. If a claim has					
		e claims in alphabetical order than one creditor holds a parti			wo priority unsecured ci	airns, iiii out the Contil	luation Page of
(	(For an explana	ation of each type of claim, se	e the instructions for this form	n in the instruction booklet.)			
					Total claim	Priority amount	Nonpriority amount
2.1	IRS		Last 4 digits of	account number 2014	\$574.00	\$574.00	\$0.00
	•	editor's Name			<u> </u>		
	P.O. Bo	x 7346 phia, PA 19101-7346	When was the d	ept incurred?		_	
		treet City State Zlp Code	As of the date y	ou file, the claim is: Check	all that apply		
	Who incurred	d the debt? Check one.	☐ Contingent				
	Debtor 1 c	only	☐ Unliquidated				
	Debtor 2 o	only	☐ Disputed				
	Debtor 1 a	and Debtor 2 only	Type of PRIORIT	TY unsecured claim:			
	☐ At least or	ne of the debtors and another	☐ Domestic sup	port obligations			
	_	his claim is for a communit	v debt Taxes and ce	rtain other debts you owe the	e aovernment		
		subject to offset?		ath or personal injury while y	=		
	No		☐ Other. Specify	У			
	☐ Yes		·	Tax Liability			
Part	l ist Δ	II of Your NONPRIORITY	Unsecured Claims				
		ors have nonpriority unsecu					
	_ ′						
		ve nothing to report in this par	t. Submit this form to the cou	rt with your other schedules.			
	Yes.						
		nonpriority unsecured clai					
		m, list the creditor separately f or holds a particular claim, list					

Total claim

Part 2.

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or 1 Carol L Ward	Case number (if know)				
Cavalry Portfolio LLC	Last 4 digits of account number	\$117.00			
PO Box 27288	When was the debt incurred?				
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
■ Debtor 1 only	☐ Contingent				
<u> </u>	•				
	Type of NONPRIORITY unsecured claim:				
_	☐ Student loans				
debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
-	<u> </u>				
Yes	Other. Specify				
Cda/pontiac	Last 4 digits of account number 4225	\$75.00			
Nonpriority Creditor's Name	Last 4 digits of account number 4233	φ/5.00			
415 E Main St	When was the debt incurred? Opened 10/01/15				
	As of the date you file the claim is Cheek all that apply				
	As of the date you me, the claim is. Check all that apply				
_	Contingent				
	_ `				
	·				
	Student loans				
debt	Obligations arising out of a separation agreement or divorce that you did not				
•	<u> </u>				
□ Yes	Collection Attorney Heartland Cardiovascular  Other. Specify Cente				
	Last 4 digits of account number 8563	\$253.00			
Po Box 416	When was the debt incurred? Opened 12/01/10				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	,				
Debtor 1 only	☐ Contingent				
Debtor 2 only					
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
☐ At least one of the debtors and another					
☐ Check if this claim is for a community					
debt Is the claim subject to offset?					
■ No					
Yes	Collection Attorney Internal Medicine And Family				
	Cavalry Portfolio LLC Nonpriority Creditor's Name PO Box 27288 Tempe, AZ 85285 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Cda/pontiac Nonpriority Creditor's Name 415 E Main St Streator, IL 61364 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Collection Prof/lasalle Nonpriority Creditor's Name Po Box 416 La Salle, IL 61301 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No At least one of the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Cavalry Portfolio LLC Nonpriority Creditor's Name PO Box 27288 Tempe, AZ 65285 Number Street City State 2ip Code Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only Debtor 2 only Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 and 5 only Debtor 9 only Debtor 1 only Debt			

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Carol L Ward	Case number (if know)				
Credit Collection Services Nonpriority Creditor's Name	Last 4 digits of account number	\$86.53			
725 Canton Street Norwood, MA 02062	When was the debt incurred?				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	□ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify Quest diagnostics				
Credit Collection Services	Last 4 digits of account number	\$286.00			
Nonpriority Creditor's Name Two Wells Avenue Newton Center, MA 02459	When was the debt incurred?				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	□ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Met Life Auto & Home				
Credit Management Lp	Last 4 digits of account number 5083	\$856.00			
Nonpriority Creditor's Name 4200 International	When was the debt incurred? Opened 11/01/13				
Carrollton, TX 75007					
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	_				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Student loans				
Check if this claim is for a community					
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
debt					

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Debto	or 1 Carol L Ward	Case number (if know)				
4.7	Credtrs Coll	Last 4 digits of account number 6560	\$94.00			
	Nonpriority Creditor's Name Po Box 63	When was the debt incurred? Opened 5/01/10				
	Kankakee, IL 60901  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce tha report as priority claims	t you did not			
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Collection Attorney Associate Pathol Joli				
4.8	Credtrs Coll Nonpriority Creditor's Name	Last 4 digits of account number0132	\$84.00			
	Po Box 63	When was the debt incurred? Opened 9/01/10				
	Kankakee, IL 60901		<del></del>			
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a separation agreement or divorce tha report as priority claims</li> </ul>	t you did not			
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Collection Attorney Associate Pathol Joli	ogists Of			
4.9	ERC/Enhanced Recovery Corp Nonpriority Creditor's Name	Last 4 digits of account number	\$274.00			
	8014 Bayberry Rd	When was the debt incurred? Opened 9/01/12				
	Jacksonville, FL 32256	<u> </u>				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	$\square$ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that	t you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	Collection Attorney Comcast Cable  Communications				

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Debt	or I Carol L Ward	Case number (if know)				
4.1 0	I.D.E.S.	Last 4 digits of account number 0515	\$16,554.91			
	Nonpriority Creditor's Name Benefit Repayments PO Box 6996	When was the debt incurred?				
	Chicago, IL 60680  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Overpayment of Benefits	_			
4.1 1	Illinois Collection Se	Last 4 digits of account number 8422	\$2,100.00			
	Nonpriority Creditor's Name 8231 185th St Ste 100 Tinley Park, IL 60487	When was the debt incurred? Opened 6/01/10	_			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Collection Attorney Heart Care Center Of Illinois	_			
4.1	Illinois Collection Se	Last 4 digits of account number 9953	\$440.00			
2	Nonpriority Creditor's Name 8231 185th St Ste 100	Last 4 digits of account number 9953  When was the debt incurred? Opened 6/01/10	Ψ110.00			
	Tinley Park, IL 60487  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	_			
	Who incurred the debt? Check one.	ne et alle yeu me, and etam let etteck an alla apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	□ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	Collection Attorney Joliet Radiological Service	<del>;</del>			

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Carol L Ward Case number (if know)

Debtor	1 Carol L Ward		Case number (if know)				
4.1							
3	Joliet Radiological SC	Last 4 digits of account number	3240	\$49.00			
	Nonpriority Creditor's Name 36910 Tresury Center Chicago, IL 60694	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharir	g plans, and other similar debts				
	Yes	Other. Specify Medical Bill					
4.1	Kohls/Capital One	Look A digito of page unt number	2619	\$201.00			
4	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ201.00			
			Opened 1/01/14 Last Active				
	Po Box 3120 Milwaukee, WI 53201	When was the debt incurred?	12/11/15				
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	• ,	,				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharir					
	Yes	Other. Specify Charge Acc					
4.1	Merchants Cr		8138	\$173.00			
5	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ173.00			
	223 W. Jackson Blvd.	When was the debt incurred?	Opened 1/01/12				
	Suite 400						
	Chicago, IL 60606  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the dam	S. Oncok an that appry				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	Student loans					
	debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	Other, Specify Collection A	ttorney Edward Hospital				

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Debtor 1 Carol L Ward Case number (if know) 4.1 NCC \$20.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 815 Commerce Dr, Suite 270 When was the debt incurred? Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Edward Health Ventures ☐ Yes 4.1 Nicor \$600.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 2020 When was the debt incurred? Aurora, IL 60507 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Gas Bill ☐ Yes 4.1 Security Finance 1262 \$1.026.00 8 Last 4 digits of account number Nonpriority Creditor's Name Centralized Bankruptcy Opened 10/28/15 Last Active Po Box 1893 When was the debt incurred? 11/27/15 Spartanburg, SC 29304 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes

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Carol L Ward Case number (if know)

Debtor	1 Carol L Ward		Case number (if know)				
4.1 9	Synchrony Bank/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	1846	\$388.00			
	Attn: Bankruptcy Po Box 103104 Roswell, GA 30076	When was the debt incurred?	Opened 12/01/14 Last Active 10/30/15				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	O continuent					
	Debtor 2 only	☐ Contingent ☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	_	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	Other Specify Charge Acc	ount				
4.2	Ttl Fin Ac Nonpriority Creditor's Name	Last 4 digits of account number	1556	\$14,804.00			
	2900 West Irving P Chicago, IL 60618	When was the debt incurred?	Opened 3/26/15 Last Active 11/02/15				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim					
	■ Debtor 1 only	☐ Contingent	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	$\square$ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	Yes	☐ Yes ☐ Other. Specify Automobile					
4.2 1	Verizon Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$1,309.00			
	500 Technology Dr Suite 500 Weldon Spring, MO 63304	When was the debt incurred?	Opened 4/01/14 Last Active 2/28/15				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other Specify					

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Debt	or 1 Carol L Ward		Case number (if know)				
4.2	Wal Mart	Lord A Political Control of Control		\$518.00			
2	Nonpriority Creditor's Name	Last 4 digits of account number		φ310.00			
	2500 W. 95th Ave.	When was the debt incurred?					
	Chicago, IL 60628						
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify					
4.2	W K 15 1			<b>#</b> 400.00			
3	Woodforest Bank	Last 4 digits of account number		\$406.00			
	Nonpriority Creditor's Name 2424 jefferson St	When was the debt incurred?					
	Joliet, IL 60435						
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	otor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	ast one of the debtors and another  Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	Пол. 1. 11					
	debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify					
4.2							
4	World Acceptance Corp	Last 4 digits of account number	0401	\$582.00			
	Nonpriority Creditor's Name		Opened 9/01/15 Leat Active				
	20660 Caton Farm Rd Unit	When was the debt incurred?	Opened 8/01/15 Last Active 11/25/15				
	Crest Hill, IL 60403	When was the dest mounted?	11/20/10				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes ☐ Other. Specify Unsecured Debt						

### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Page 27 of 52 Case number (if know) Debtor 1 Carol L Ward

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	574.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	574.00
					otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	41,296.44
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	41,296.44

		17/1/11111				
Fill in this infor	First Name Middle Name Last Name r 2 if, filing) First Name Middle Name Last Name  I States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  number					
Debtor 1		Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				_
					<u></u>
	Number	Street			
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	
2.4					<u> </u>
	Name				
	Number	Street			<del></del>
	0''		0: :	710.0	
	City		State	ZIP Code	
2.5	N				_
	Name				
	Number	Street			_
	Number	Jueer			
	City		State	ZIP Code	

		Docume	ent Page 29 d	コナラン	
Fill in this	information to identify your				
Debtor 1	Carol L Ward				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
		- NOITHERW BIOTHIOT	OI ILLIIVOIO		
Case numb	per				☐ Check if this is an
					amended filing
Official	Learn 100L				
	Form 106H	-1-1			
Sched	ule H: Your Cod	ebtors			12/15
1. Do y	and case number (if known) you have any codebtors? (If			as a codebtor.	
■ No □ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana,				ates and territories include
`	Go to line 3.  Did your spouse, former spouse.	use, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the o	ith you. List the person shown creditor on Schedule D (Official nedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zi	P Code		Column 2: The creditor Check all schedules the	or to whom you owe the debt nat apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
1	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street	State	ZIP Code	_	
(	City	Sidie	ZIP Code		

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							_			
Fill	in this information to	identify your ca	ase:							
Del	otor 1	Carol L Ward	<u> </u>			_				
	otor 2 ouse, if filing)					_				
Uni	ted States Bankrupto	cy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_				
	se number 			-				ed filing ent showin	g postpetition ollowing date:	chapter
0	fficial Form	106I					MM / DD/	YYYY		
S	chedule I: \	our Inc	ome				, 22,			12/15
spo atta	use. If you are sepa ch a separate shee	arated and you t to this form. Employment	are married and not fili r spouse is not filing w On the top of any additi	ith you, do not incli onal pages, write y	ude infori	nati	on about your sp I case number (if	ouse. If me known). A	ore space is i	needed,
	information.			Debtor 1				Debtor 2 or non-filing spouse		
	attach a separate	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed □ Not employed				☐ Employed ☐ Not employed		
	Include part-time, s self-employed wor		Occupation Employer's name	Senior Star Mar	nagemen	t Cc				
	Occupation may in or homemaker, if it		Employer's address	1516 S boston A Tulsa, OK 7411		301				
	2: 2.		How long employed t	here? Started	d 7/20/15					
<b>Esti</b> spou	mate monthly inco	eparated. spouse have mo	ate you file this form. If	, ,	·			·	·	J
							For Debtor 1		btor 2 or ing spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	3,904.14	\$	N/A	
3.	Estimate and list	monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross li	ncome. Add lir	ne 2 + line 3.		4.	\$	3,904.14	\$	N/A	

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Deb	tor 1	Carol L Ward	-	C	Case number (if I	(nown)				
					For Debtor 1		non-f	ebtor 2 o	ıse	
	Cop	by line 4 here	4.		\$3,90	4.14	\$		N/A	
5.	List	all payroll deductions:								
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b			2.67 0.00	\$		N/A N/A	
	5c.	Voluntary contributions for retirement plans	50		Ī	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	50		·	0.00	\$		N/A	
	5e.	Insurance	5e	<del>)</del> .	. —	0.48	\$		N/A	
	5f.	Domestic support obligations	5f.		\$	0.00	\$		N/A	
	5g.	Union dues	5g	J.	\$	0.00	\$		N/A	
	5h.	Other deductions. Specify: Dental	5h	1.+	\$ 2	5.63	+ \$		N/A	
		Vision			\$	7.22	\$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$1,16	6.00	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$2,73	8.14	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b		·	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	<b>)</b> .		0.00	\$		N/A	
	8d.	Unemployment compensation	80	ı.	\$	0.00	\$		N/A	
	8e.	Social Security	86	€.	\$	0.00	\$		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f. 8g			0.00 0.70	\$ 		N/A N/A	
	8h.	Other monthly income. Specify:	8h	1.+			+ \$		N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S4	0.70	\$		N/A	
10	Cal	aulate monthly income. Add line 7 + line 0	10	\$	0.770.04	+ \$		NI/A I	1 0	770.04
10.		culate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Φ_	2,778.84	+ \$		N/A = 5	P	2,778.84
11.	State Inclination Other	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe				•	hedule J. 11. +\$	3	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The respect that amount on the Summary of Schedules and Statistical Summary of Certaillies						12. \$		2,778.84
13	Do '	you expect an increase or decrease within the year after you file this form	?						mbine onthly i	d income
		No.  Yes. Explain:								

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	in their information to information				
FIII	in this information to identify your case:				
Deb	Carol L Ward			if this is: an amended filing	
Deb	otor 2		_	ū	ving postpetition chapter
(Spo	ouse, if filing)				the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLI	INOIS	N	MM / DD / YYYY	
Cas	se number				
(If kı	nown)				
Of	fficial Form 106J				
Sc	chedule J: Your Expenses				12/15
Be a	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to thi mber (if known). Answer every question.				
Pari	t 1: Describe Your Household Is this a joint case?				
١.	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expense	es for Separate House	hold of Debto	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				Yes
					□ No □ Yes
					☐ Yes
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than				
	yourself and your dependents?				
Dar	t 2: Estimate Your Ongoing Monthly Expenses				
Est exp	timate your expenses as of your bankruptcy filing date unless benses as of a date after the bankruptcy is filed. If this is a supplicable date.				
the	lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I</i> : ficial Form 106l.)			Your expo	enses
`	,				
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	. Include first mortgage	4. \$		850.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5.	<ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as h</li> </ul>	homo oquity leess	4d. \$ 5. \$		0.00
J.	Additional mortgage payments for your residence, Such as f	HOLLIE EURITA IOSUS	J. D		UUU

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6. Utilities:  6. Electricity, heat, natural gas 6. Electricity, heat, natural gas 6. Electricity, heat, natural gas 6. Water, sewer, garbage collection 6. Telephone, cell phone, Internet, satellite, and cable services 6. Telephone, cell phone, Internet, satellite, and cable services 6. Telephone, cell phone, Internet, satellite, and cable services 6. Telephone, cell phone, Internet, satellite, and cable services 6. Telephone, cell phone, Internet, satellite, and cable services 7. Todo and housekeeping supplies 7. Todo and children's education costs 8. \$ 0.000 9. Clothing, laundry, and dry cleaning 9. \$ 1855.00 10. Personal care products and services 10. \$ 100.00 11. Medical and dental expenses 11. \$ 1000.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 14. Charitable contributions and religious donations 15. Insurance 15. Life insurance 15. Life insurance 15. Life insurance 15. \$ 0.00 15. Life insurance 15. \$ 0.00 15. Life insurance 15. \$ 0.00 15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Life insurance 15. \$ 0.00 15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Life insurance 15. \$ 0.00 15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Cylinde insurance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106), 18. \$ 0.00 17. Cother, Specify: 17. Cother, Specify: 17. Cother, Specify: 17. Cother payments for Vehicle 1 17. Car payments on ine 5, Schedule 1, Your Income (Official Form 106), 18. \$ 0.00 19. Other payments on ine 5, Schedule 1, Your Income (Official Form 106), 19. Other payments on ine 5, Schedule 1, Your Income (Official Form 106), 19. Other payments on ine fyce payments on ine 1, Schedule 1, Your Income	Debtor 1	Carol L Ward	Case num	ber (if known)	
Bea   Electricity, heat, natural gas   Bea   \$350,00	6 II+i	ities:			
Beb. Water, server, garbage collection   6c.   5,000	-		6a.	\$	350.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 50.00   6d. Other. Specify: Cable 6d. \$ 100.00   7. Food and housekeeping supplies 7. \$ 375.00   8. Childcare and children's education costs 8. \$ 0.00   7. Clothing, laundry, and dry cleaning 9. \$ 185.00   9. Clothing, laundry, and dry cleaning 9. \$ 185.00   10. Personal care products and services 10. \$ 100.00   10. Medical and dental expenses 11. \$ 100.00   11. Medical and dental expenses 11. \$ 100.00   12. Transportation. Include gas, maintenance, bus or train fare.   Do not include care payments. 12. \$ 250.00   13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00   14. Charitable contributions and religious donations 14. \$ 0.00   15. Insurance.   Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance 15b. \$ 0.00   15b. Health insurance 15c. \$ 0.00   15c. Vehicle insurance 15c. \$ 0.00   15c. Vehicle insurance 15c. \$ 0.00   15d. Other insurance. Specify: 15d. \$ 0.00   15d. Other insurance. Specify: 15d. \$ 0.00   17b. Car payments for Vehicle 1   17c. \$ 0.00   17b. Car payments for Vehicle 2   17b. Car payments for Vehicle 2   17c. \$ 0.00   17d. Other. Specify: 17c. \$ 0.00   17		•			
6d. dther. Specify: Cable 6d. \$ 100.00  7. Food and housekeeping supplies 7. \$ 375.00  8. Childcare and children's education costs 8. \$ 0.00  9. Clothing, laundry, and try cleaning 9. \$ 185.00  10. Personal care products and services 10. \$ 100.00  11. Medical and dental expenses 11. \$ 100.00  12. Transportation, include gas, maintenance, bus or train fare.  Do not include car payments. 12. \$ 250.00  13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00  14. Charitable contributions and religious donations 14. \$ 0.00  15. Insurance. 5 15. Life insurance deducted from your pay or included in lines 4 or 20. 15. Life insurance 15. \$ 0.00  15. Life insurance 15. \$ 0.00  15. Vehicle insurance 5 15. \$ 0.00  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00  17. Large payments for Vehicle 1 17. \$ 0.00  17. Corp anyments for Vehicle 2 17. \$ 0.00  17. Corp anyments for Vehicle 1 17. \$ 0.00  17. Corp anyments for Vehicle 2 17. \$ 0.00  17. Corp anyments for Vehicle 2 17. \$ 0.00  17. Corp anyments for Vehicle 2 17. \$ 0.00  17. Corp anyments for Vehicle 2 17. \$ 0.00  18. Your payments or Vehicle 2 17. \$ 0.00  19. Other specify: 19.  19. Other specify: 19.  10. Other payments you make to support others who do not live with you. \$ 0.00  20. Property, homeowner's, or renter's insurance 20. \$ 0.00  20. Property, homeowner's, or renter's insurance 20. \$ 0.00  20. Property, homeowner's, or renter's insurance 20. \$ 0.00  20. Property, homeowner's, or renter's insurance 20. \$ 0.00  20. Property, homeowner's, or renter's insurance 20. \$ 0.00  20. Property, homeowner's, or renter's insurance 20. \$ 0.00  20. Property, homeowner's, or renter's insurance 20. \$ 0.00  20. Property, homeowner's, or renter's insurance 20. \$ 0.00  20. Property, homeowner's, or renter's insurance 20. \$ 0.00  20. Property, homeowner's, or renter's insurance 20. \$ 0.00  20.				·	
Food and housekeeping supplies   7. \$   375.00				·	
B. Childcare and children's education costs   8. \$   0.00				·	
Clothing, laundry, and dry cleaning				·	
10.   Personal care products and services   10.   \$   100.00     11.   Medical and dental expenses   10.   \$   100.00     12.   Transportation. Include gas, maintenance, bus or train fare.   250.00     Do not include car payments.   12.   \$   250.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   \$   0.00     14.   Charitable contributions and religious donations   14.   \$   0.00     15.   Insurance.	-				
11.   Medical and dental expenses   11.   \$   100.00     12.   Transportation. Include gas, maintenance, bus or train fare.   2   \$   250.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   \$   0.00     14.   Charitable contributions and religious donations   14.   \$   0.00     15.   Insurance.   Do not include insurance deducted from your pay or included in lines 4 or 20.     15a.   Life insurance   15b.   \$   0.00     15b.   Health insurance   15b.   \$   0.00     15b.   Health insurance   15b.   \$   0.00     15c.   Vehicle insurance   15c.   \$   0.00     15c.   Vehicle insurance   15d.   \$   0.00     15d.   Other insurance.   Specify:   15d.   \$   0.00     16.   Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   \$   0.00     17c.   Taxes.	9. <b>Cl</b> c	thing, laundry, and dry cleaning	9.	\$	185.00
	10. <b>Pe</b> i	sonal care products and services	10.	\$	100.00
Do not include car payments.  12. \$ 250.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 14. \$ 0.00 15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.00 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance, Specify: 15d. Other insurance, Specify: 15d. Other insurance, Specify: 16d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16d. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. 20d. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20b. Real estate taxes 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Homeowner's association or condominium dues 20e. \$ 0.00 20d. Homeowner's association or condominium dues 20e. \$ 0.00 20d. Homeowner's association or condominium dues 20e. \$ 0.00 20d. Calculate your monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add lines 4 through 21. 22b. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 2,754.00 23c. Subtract your monthly expenses from line 22c above. 23d. Subtract your monthly expenses from line 22c above. 23d. Subtract your monthly expenses from your monthly income.	11. <b>Me</b>	dical and dental expenses	11.	\$	100.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books   13. \$ 0.00     14. Charitable contributions and religious donations   14. \$ 0.00     15. Insurance.   Do not include insurance deducted from your pay or included in lines 4 or 20.     15a. Life insurance   15b. \$ 0.00     15b. Health insurance   15b. \$ 0.00     15c. Vehicle insurance   15c. \$ 100.00     15c. Vehicle insurance.   15c. \$ 0.00     15c. Vehicle insurance.   15c. \$ 0.00     15c. Vehicle insurance.   15c. \$ 0.00     15d. Other insurance	12. <b>Tra</b>	nsportation. Include gas, maintenance, bus or train fare.		•	050.00
14. Charitable contributions and religious donations					250.00
15. Insurance.   Do not include insurance deducted from your pay or included in lines 4 or 20.   15a.   Life insurance   15b.   Health insurance   15b.   Health insurance   15c.   \$   0.00   15c.   Vehicle insurance   15c.   \$   100.00   15c.   Vehicle insurance   15c.   \$   100.00   15c.   Vehicle insurance   15d.   \$   0.000   15c.   Vehicle insurance   Specify:   15d.   \$   0.000   15d.   Vehicle insurance   Specify:   15d.   \$   0.000   17d.   \$   0.000   17d.   \$   0.000   17b.   \$   0.000   17c.   Other. Specify:   17c.   \$   0.000   17c.   Other. Specify:   17c.   \$   0.000   17d.   \$   0.000   17d.   Other. Specify:   17d.   \$   0.000   17d.   Specify:   17d.   \$   0.000   Specify:   17d.   \$   0.000	13. <b>En</b> t	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
15. Insurance.   15a.   S	14. Ch	aritable contributions and religious donations	14.	\$	0.00
15a. Life insurance       15a. \$       0.00         15b. Health insurance       15b. \$       0.00         15c. Vehicle insurance       15c. \$       100.00         15d. Other insurance. Specify:       15d. \$       0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:       16. \$       0.00         17. Installment or lease payments:       17a. Car payments for Vehicle 1       17a. \$       219.00         17b. Car payments for Vehicle 2       17b. \$       0.00         17c. Other. Specify:       17c. \$       0.00         17d. Other. Specify:       17d. \$       0.00         18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i).       18. \$       0.00         19. Other payments you make to support others who do not live with you. Specify:       19.       0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$       0.00         20b. Real estate taxes       20b. \$       0.00         20c. Property, homeowner's, or renter's insurance       20c. \$       0.00         20c. Property, homeowner's, or renter's insurance       20c. \$       0.00         20c. Property, homeowner's association or condominium due	15. <b>Ins</b>	urance.			
15b. Health insurance	Do	not include insurance deducted from your pay or included in lines 4 or 20.			
15c. Vehicle insurance   15c. \$   100.00	15a	i. Life insurance	15a.	\$	0.00
15c. Vehicle insurance   15c. S   100.00     15d. Other insurance. Specify:   15d. S   0.00     15d. Other insurance. Specify:   16d. S   0.00     15d. Other insurance. Specify:   16. S   0.00     17d. Specify:   16. S   0.00     17d. Car payments for Vehicle 1   17a. S   219.00     17b. Car payments for Vehicle 2   17b. S   0.00     17c. Other. Specify:   17c. S   0.00     17d. Other. Specify:   17c. S   0.00     17d. Other. Specify:   17d. S   0.00     18d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106). Specify:   19. Other payments you make to support others who do not live with you. Specify:   19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.	15b	o. Health insurance	15b.	\$	
15d. Other insurance. Specify:	150	:. Vehicle insurance		·	
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Specify:   16. \$ 0.00     Installment or lease payments:   17a. Car payments for Vehicle 1   17a. \$ 219.00     17b. Car payments for Vehicle 2   17b. \$ 0.00     17c. Other. Specify:   17c. \$ 0.00     17d. Other. Specify:   17d. \$ 0.00     18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061).   18. \$ 0.00     19. Other payments you make to support others who do not live with you. Specify:   19.     20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.     20a. Mortgages on other property   20a. \$ 0.00     20b. Real estate taxes   20b. \$ 0.00     20c. Property, homeowner's, or renter's insurance   20c. \$ 0.00     20d. Maintenance, repair, and upkeep expenses   20d. \$ 0.00     20d. Homeowner's association or condominium dues   20e. \$ 0.00     20d. Other: Specify:   21. +\$ 0.00     21. Other: Specify:   21. +\$ 0.00     22. Calculate your monthly expenses   22a. Add lines 4 through 21.   22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   22c. Add line 22a and 22b. The result is your monthly expenses.   \$ 2,754.00     23c. Subtract your monthly expenses from line 22c above.   23b\$ 2,754.00		• •		¥	0.00
Installment or lease payments:			16	\$	0.00
17a. Car payments for Vehicle 1       17a. \$       219.00         17b. Car payments for Vehicle 2       17b. \$       0.00         17c. Other. Specify:       17c. \$       0.00         17d. Other. Specify:       17d. \$       0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18. \$       0.00         18. Other payments you make to support others who do not live with you.       \$       0.00         Specify:       19.       19.         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$       0.00         20b. Real estate taxes       20b. \$       0.00         20c. Property, homeowner's, or renter's insurance       20c. \$       0.00         20c. Property, homeowner's association or condominium dues       20d. \$       0.00         20c. Homeowner's association or condominium dues       20e. \$       0.00         21. Other: Specify:       21. +\$       0.00         22c. Add lines 4 through 21.       \$       2,754.00         22c. Add lines 22a and 22b. The result is your monthly expenses.       \$       2,754.00         23a. Copy line 12 (your combined monthly income) from Schedule I.       23a. \$       2,754.00				<b>—</b>	0.00
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20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.					0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23a. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 2,778.84 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.				·	
20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 21. Other: Specify: 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.	20k	o. Real estate taxes		·	0.00
20e. Homeowner's association or condominium dues  20e. \$ 0.00  21. Other: Specify:  21. +\$ 0.00  22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23c. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.	200	. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20e. Homeowner's association or condominium dues  20e. \$ 0.00  21. Other: Specify:  21. +\$ 0.00  22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23c. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.	200	I. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
21. Other: Specify:  22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.			20e.	\$	
22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.	21. <b>Ot</b> ł	ner: Specify:		·	
22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  23c. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. Copy your monthly expenses from line 22c above.  23b. Copy your monthly expenses from your monthly income.				<u> </u>	0.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23c. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22c above. 23b. Copy your monthly expenses from your monthly income.					
22c. Add line 22a and 22b. The result is your monthly expenses.  23c. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.	228	a. Add lines 4 through 21.		\$	2,754.00
22c. Add line 22a and 22b. The result is your monthly expenses.  23c. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.	22b	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.				l '	2 754 00
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 2,778.84 23b. Copy your monthly expenses from line 22c above. 23b\$ 2,754.00 23c. Subtract your monthly expenses from your monthly income.	220				2,104.00
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 2,778.84 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.	23. <b>Ca</b> l	culate your monthly net income.			
23b. Copy your monthly expenses from line 22c above.  23b\$ 2,754.00  23c. Subtract your monthly expenses from your monthly income.			23a.	\$	2,778.84
23c. Subtract your monthly expenses from your monthly income.		· · · · · · · · · · · · · · · · · · ·			•
	_34	100			2,701.00
	230	Subtract your monthly expenses from your monthly income.			
	200		23c.	\$	24.84
		,,,			
24. Do you expect an increase or decrease in your expenses within the year after you file this form?	24. <b>Do</b>	you expect an increase or decrease in your expenses within the year after yo	ou file this	s form?	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of	For	example, do you expect to finish paying for your car loan within the year or do you expect your			or decrease because of a
modification to the terms of your mortgage?	mod	dification to the terms of your mortgage?			
■ No.		No.			
☐ Yes. Explain here:					

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Fill in this infor	mation to identify your	case.			
Debtor 1	Carol L Ward	case.			
200101	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					neck if this is an nended filing
f two married performance of the file this betaining money	eople are filing togethe	r, both are equally respo le bankruptcy schedules n connection with a banl			
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bankruptcy Petitio  Declaration, and Signatur	
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	d with this declaration and	
X /s/ Card	ol L Ward		x		
Carol L			Signature of I	Debtor 2	
Date [	May 2, 2016		Date		

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Fill	n this inforr	nation to identify you	r case:			
Deb	tor 1	Carol L Ward First Name	Middle Name	Last Name		
Deb	tor 2	Filst Name	Middle Name	Last Name		
(Spou	ise if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case	e number					
(if kno	own)					Check if this is an
						amended filing
∩ff	ioial Ea	rm 107				
	icial Fo		Affairs for Individ	luals Eiling for B	ankruntov	4/4
						4/10
			ible. If two married people a attach a separate sheet to			
numl	ber (if know	n). Answer every que	stion.			
Part	1: Give I	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	☐ Married					
	■ Not mai					
2.	During the l	ast 3 years, have you	lived anywhere other than	where you live now?		
	_	aot o youro, navo you	involution of the trial of	mioro you mio nom .		
	∐ No ■ Vos Lis	et all of the places you	lived in the last 3 years. Do no	at include where you live now	,	
			ilved in the last 3 years. Do no	·		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
	1413 s Chi		From-To:	☐ Same as Debtor	1	☐ Same as Debtor 1
	Joliet, IL 6	0436	2012-April 201	5		From-To:
	s and territor	ies include Arizona, Ca	ver live with a spouse or leg llifornia, Idaho, Louisiana, Nev hedule H: Your Codebtors (Of	vada, New Mexico, Puerto R		
Part	2 Explai	in the Sources of You	ır Income			
	Fill in the tota	al amount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	all businesses, including part	-time activities.	endar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,306.48	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Case number (if known) Document

Debtor 1 Carol L Ward

			Debtor 1		Debtor 2			
			Sources of income	Gross income	Sources of inco	ome Gross incom	Gross income	
			Check all that apply.	(before deductions and exclusions)	Check all that ap		ctions	
For last cale (January 1 to		31, 2015 )	■ Wages, commissions, bonuses, tips	\$38,957.00	☐ Wages, common bonuses, tips	nissions,		
			☐ Operating a business		☐ Operating a b	ousiness		
For the caler (January 1 to			■ Wages, commissions, bonuses, tips	\$47,143.00	☐ Wages, common bonuses, tips	nissions,		
			☐ Operating a business		☐ Operating a b	usiness		
Include ir and othe winnings List each	ncome regard r public bene . If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	e during this year or the two ner that income is taxable. Ex- pensions; rental income; inte- se and you have income that your name from each source separa	amples of other income are a rest; dividends; money collec you received together, list it c	ted from lawsuits; renly once under Deb	oyalties; and gambling and btor 1.		
			Delicera		Dahia a			
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.	Gross incom (before deduction and exclusion	ctions	
From Janua the date you			Estimated Pension Income	\$40.70				
For last cale (January 1 to		31, 2015 )	Estimated Pension Income	\$488.40				
For the caler (January 1 to			Estimated Pension Income	\$488.40				
Part 3: Lis	st Certain Pa	yments You	Made Before You Filed for	Bankruptcy				
-	Neither D	ebtor 1 nor D	's debts primarily consume Debtor 2 has primarily consi personal, family, or househo	u <mark>mer debts.</mark> Consumer debt	s are defined in 11 l	U.S.C. § 101(8) as "incurred	d by an	
	During the	90 days befo	ore you filed for bankruptcy, d	id vou pav anv creditor a tota	l of \$6.425* or more	e?		
	□ No.	Go to line 7	, , , , , , , , , , , , , , , , , , , ,	,	. 0. 40, 120 0			
	□ Yes		each creditor to whom you pa	id a total of \$6.425* or more i	n one or more pavn	nents and the total amount	vou	
		paid that cr not include	editor. Do not include payment payments to an attorney for to ton 4/01/19 and every 3 year	nts for domestic support oblights bankruptcy case.	ations, such as chil	ld support and alimony. Also		
■ Yes	. Debtor 1 o	or Debtor 2 o	or both have primarily consumer you filed for bankruptcy, di	umer debts.		aujustinent.		
		·		id you pay any creditor a tota	i di addo di mole?			
	□ No.	Go to line 7						
	■ Yes	include pay	each creditor to whom you pa ments for domestic support o this bankruptcy case.					
Credito	r's Name and	d Address	Dates of payme	ent Total amount	Amount you	Was this payment for		

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ase number (if known)

Debtor 1 Carol L Ward

**Creditor's Name and Address** Amount you Dates of payment **Total amount** Was this payment for ... still owe paid Matthew Baker \$850.00 monthly \$2,550.00 \$0.00 ■ Mortgage 358 S Raynor Ave rent ☐ Car Joliet, IL 60435 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors Other Rent Heights Finance Corp \$219.00/mo each \$4,049.00 \$657.00 ■ Mortgage 1145 Essington Rd month ■ Car Joliet, IL 60435 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other\_ Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address **Dates of payment** Total amount Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address **Dates of payment** Total amount Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ■ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 

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Case number (if known)

Document Debtor 1 Carol L Ward

	Creditor Name and Address	Describe the Property	Date	Value of the property				
		Explain what happened						
	Ttl Fin Ac 2900 West Irving P	2010 Nissan Altima	12/3/15	\$7,500.00				
	Chicago, IL 60618	■ Property was repossessed.						
	-	☐ Property was foreclosed.						
		☐ Property was garnished.						
		☐ Property was attached, seized or levied.						
		Troperty was attached, seized or levied.						
11.	Within 90 days before you filed for bank accounts or refuse to make a payment b	ruptcy, did any creditor, including a bank or financial because you owed a debt?	institution, set off any	amounts from your				
	No							
	☐ Yes. Fill in the details.							
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount				
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, c	uptcy, was any of your property in the possession of a or another official?	n assignee for the ben	efit of creditors, a				
	■ No							
	☐ Yes							
	L res							
Par	t 5: List Certain Gifts and Contribution	ns						
				_				
13.	_ ′	ruptcy, did you give any gifts with a total value of more	e than \$600 per person	?				
	■ No							
	Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$6 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14	Within 2 years before you filed for bank	ruptcy, did you give any gifts or contributions with a to	otal value of more than	\$600 to any charity?				
17.	_	ruptcy, and you give any girts of contributions with a to	otal value of more than	wood to arry criainty :				
	■ No							
	Yes. Fill in the details for each gift or							
	Gifts or contributions to charities that	total Describe what you contributed	Dates you	Value				
	more than \$600 Charity's Name		contributed					
	Address (Number, Street, City, State and ZIP Coo	le)						
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankru or gambling?	uptcy or since you filed for bankruptcy, did you lose ar	nything because of the	ft, fire, other disaster,				
	■ No							
	Yes. Fill in the details.							
		B						
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your	Value of property				
	now the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	loss	lost				

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Case number (if known)

Document Debtor 1 Carol L Ward

D	List Contain Research on Tournelle							
	List Certain Payments or Transfers  Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and va transferred	alue of any proper	ty	Date payment or transfer was made	Amount o paymen		
17.	Within 1 year before you filed for bankruptcy, dipromised to help you deal with your creditors on Do not include any payment or transfer that you list.	r to make payments			transfer any prope	rty to anyone who		
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address	Description and vatransferred	alue of any proper	ty	Date payment or transfer was made	Amount o paymen		
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.							
	Person Who Received Transfer Address	property transferred payments			ny property or received or debts hange	Date transfer was made		
19.	Person's relationship to you  9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you as beneficiary? (These are often called asset-protection devices.)  ■ No □ Yes. Fill in the details.  Name of trust  Description and value of the property transferred  Date Transfer							
Par	t 8: List of Certain Financial Accounts, Instrur	nents, Safe Deposit	Boxes, and Storag	ge Units		made		
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.							
		st 4 digits of count number	Type of account of instrument	clos	e account was sed, sold, ved, or sferred	Last balance before closing o transfe		
21.	Do you now have, or did you have within 1 year	before you filed for	bankruptcy, any s	afe deposit	box or other depos	itory for securities,		

cash, or other valuables?

No

☐ Yes. Fill in the details.

Name of Financial Institution

Address (Number, Street, City, State and ZIP Code)

Who else had access to it? Address (Number, Street, City,

State and ZIP Code)

Describe the contents

Do you still have it?

Case 16-14956 Doc 1 Filed 05/02/16 Entered 05/02/16 10:34:01 Desc Main Page 40 of 52 Document ase number (*if known*) Debtor 1 Carol L Ward 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Describe the contents Do you still Who else has or had access Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Value **Owner's Name** Where is the property? Describe the property (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. Environmental law, if you Date of notice Name of site Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?
	■ No
	Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

No Yes. Fill in the details. Date of notice Name of site Governmental unit Environmental law, if you Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code)

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

A member of a limited liability company (LLC) or limited liability partnership (LLP)

Case 16-14956 Doc 1 Filed 05/02/16 Entered 05/02/16 10:34:01 Page 41 of 52 Case number (if known) Document Debtor 1 Carol L Ward ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Carol L Ward Signature of Debtor 2 Carol L Ward Signature of Debtor 1 **Date Date** May 2, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

- No
- ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inforn	nation to identify your	case:		
Debtor 1	Carol L Ward			
	First Name	Middle Name	Last Name	_
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
			RICT OF ILLINOIS	
United States Bai	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS	_
Case number _				D. Observativity in the con-
(II KNOWN)				☐ Check if this is an amended filing
If you are an indi		oter 7, you must fill	iduals Filing Under Cha	apter 7 12/15
you have lease You must file this	ed personal property a s form with the court w ver is earlier, unless th	nd the lease has no ithin 30 days after	ot expired. you file your bankruptcy petition or by the d e time for cause. You must also send copies	
	ople are filing together d date the form.	in a joint case, bot	th are equally responsible for supplying cor	rect information. Both debtors must
	and accurate as possib our name and case nur		needed, attach a separate sheet to this form	n. On the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims		
-			: Creditors Who Have Claims Secured by Pro	anarty (Official Form 100D) fill in the
information be	low.		Creditors who have Claims Secured by Fro	operty (Official Form 106D), fill in the
Identify the cre	editor and the property the	nat is collateral	What do you intend to do with the propert secures a debt?	by that Did you claim the property as exempt on Schedule C?
	eights Finance Corp		☐ Surrender the property.	□No
name:			<ul><li>☐ Retain the property and redeem it.</li><li>■ Retain the property and enter into a</li></ul>	■ Yes
Description of	2007 Toyota Camry	110,000 miles	Reaffirmation Agreement.	, 35
property securing debt:			☐ Retain the property and [explain]:	
scearing debt.				
	our Unexpired Persona			
in the information	n below. Do not list rea	l estate leases. Une	in Schedule G: Executory Contracts and Unexpired leases are leases that are still in effective trustee does not assume it. 11 U.S.C. § 3	ect; the lease period has not yet ended.
Describe your u	nexpired personal prop	perty leases		Will the lease be assumed?
Lessor's name:				D. N.
Description of lea	ised			□ No
Property:				☐ Yes
Lessor's name:				□ No
Description of lea	sed			_
Property:				☐ Yes
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Deb	otor 1	Carol L Ward	Case number (if known)	
	scriptior perty:	n of leased		□ Yes
Des	sor's na scriptior perty:	ame: n of leased		□ No
Des	sor's na scriptior perty:	ame: n of leased		□ No
Des	sor's na scriptior perty:	ame: n of leased		□ No
Des	sor's na scriptior perty:	ame: n of leased		□ No
Und	er pena	Sign Below alty of perjury, I declare that I h at is subject to an unexpired l	eve indicated my intention about any property of my estate that sec	cures a debt and any personal
X	Caro	arol L Ward I L Ward ture of Debtor 1	X Signature of Debtor 2	
	Date	May 2, 2016	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-14956 Doc 1 Filed 05/02/16 Entered 05/02/16 10:34:01 Desc Main Document Page 48 of 52

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court Northern District of Illinois**

In r	e	Carol L Ward					Case No.		
					Debtor	(s)	Chapter	7	
		DIS	CLO	OSURE OF COMI	PENSATION OI	F ATTORNEY	FOR DI	EBTOR(S)	
1.	com	pensation paid to	o me v	29(a) and Fed. Bankr. P. 2 within one year before the ne debtor(s) in contemplati	filing of the petition in	bankruptcy, or agre	ed to be paid	to me, for services	hat s rendered or to
		For legal service	es, I h	ave agreed to accept			\$	1,250.00	
				his statement I have receiv			\$	0.00	
							\$	1,250.00	
2.	The	source of the co	mpens	sation paid to me was:					
		Debtor		Other (specify):					
3.	The	source of compe	ensatio	on to be paid to me is:					
		Debtor		Other (specify):					
4.		I have not agree	d to sh	nare the above-disclosed co	ompensation with any o	other person unless t	hey are mem	bers and associates	s of my law firm.
				the above-disclosed comp					y law firm. A
5.	In r	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	b. I c. I	Preparation and f	iling of the d	s financial situation, and re of any petition, schedules, lebtor at the meeting of cre eeded]	statement of affairs and	d plan which may be	required;	-	ankruptcy;
6.	Вуа	agreement with t	he det	otor(s), the above-disclosed	d fee does not include t	he following service	e:		
					CERTIFICATI	ION			
this		rtify that the fore ruptcy proceedir		is a complete statement of	f any agreement or arra	angement for payme	nt to me for r	representation of th	e debtor(s) in
	May	2, 2016			/s/ Brer	nt Ingram			
1	Date					ngram 6306225			
				<i>re of Attorney</i> emrad Law Firm, Ll	LC				
					20 S. C	Clark Street			
					28th Fl				
						o, IL 60603 13 0625 Fax: (31	2) 913 0631	I	
						d@semradlaw.cor			
					Name o	f law firm			

#### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1250 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Carol L Ward Matter Number 461420-001 Initia:

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 5/2/2016	
Client Caual Mars	Client
Attorney 10	

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#### United States Bankruptcy Court Northern District of Illinois

In re	Carol L Ward	Debtor(s)	Case No. Chapter 7	
	VER	IFICATION OF CREDITOR M		
		Number of	Creditors:	23
	The above-named Debtor(s) he (our) knowledge.	ereby verifies that the list of credi	tors is true and correct to tl	he best of my
Date:	May 2, 2016	/s/ Carol L Ward Carol L Ward Signature of Debtor		

Cavalry Pocase 16-14956 Doc 1 Filed 05/02/16 Entered 05/02/16 10:34:01 Desc Main PO Box 27288 P. Document 34 Page 52 of 52 2500 W. 95th Ave. Tempe, AZ 85285 Philadelphia, PA 19101-7346 Chicago, IL 60628

Cda/pontiac 415 E Main St Streator, IL 61364 Joliet Radiological SCWoodforest Bank36910 Tresury Center2424 jefferson StChicago, IL 60694Joliet, IL 60435

Collection Prof/lasalle Kohls/Capital One Po Box 416 Po Box 3120

La Salle, IL 61301 Milwaukee, WI 53201

World Acceptance Corp 20660 Caton Farm Rd Unit Crest Hill, IL 60403

Credit Collection Services Merchants Cr

725 Canton Street 223 W. Jackson Blvd.
Norwood, MA 02062 Suite 400
Chicago, IL 60606

Credit Management Lp 4200 International Carrollton, TX 75007

NCC 815 Commerce Dr, Suite 270 Oak Brook, IL 60523

Credtrs Coll Credtrs Coll Nicor
Po Box 63 P.O. Box 2020
Kankakee, IL 60901 Aurora, IL 60507

ERC/Enhanced Recovery Corp Security Finance

8014 Bayberry Rd Centralized Bankruptcy
Jacksonville, FL 32256 Po Box 1893
Spartanburg, SC 29304

Heights Finance Corp 1145 Essington Rd Joliet, IL 60435

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

I.D.E.S. Benefit Repayments PO Box 6996 Chicago, IL 60680

Ttl Fin Ac 2900 West Irving P Chicago, IL 60618

Illinois Collection Se 8231 185th St Ste 100 Tinley Park, IL 60487

Verizon 500 Technology Dr Suite 500 Weldon Spring MC Weldon Spring, MO 63304